

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??:

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Flexible Wrist for Surgical Tool

Attorney Docket Number:: 017516-009610US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 4

Total Drawing Sheets:: 11

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Middle Name:: G.
Family Name:: Cooper
Name Suffix::
City of Residence:: Menlo Park
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 304 Concord Drive
City of Mailing Address:: Menlo Park
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94025

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: S. Christopher
Middle Name::
Family Name:: Anderson
Name Suffix::
City of Residence:: Northampton
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 371 Prospect Street
City of Mailing Address:: Northampton
State or Province of mailing address:: MA
Country of mailing address::
Postal or Zip Code of mailing address:: 01060

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/431,636	12/06/02

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::